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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted With Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number PU020392

First Named Inventor Junbiao Zhang

COMPLETE IF KNOWN

Application Number /

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

WATERMARKING DIGITAL DATA AT A USER DEVICE

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 08/13/2003 as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/404,884	08/21/2002	

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

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Address Thomson Licensing Inc.			
Address Two Independence Way, Suite 200			
City PRINCETON		State NJ	ZIP 08540
Country USA	Telephone (609-734-6839		Fax (609) 734 -6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>JUNBIAO</u>		Family Name <u>ZHANG</u> or Surname	
Inventor's Signature <u>[Signature]</u>		Date <u>10/21/03</u>	
Residence: City <u>BRIDGEWATER</u>	State NJ	Country US	Citizenship CHINA
Mailing Address			
Mailing Address 20 JENNA DRIVE			
City BRIDGEWATER	State NJ	ZIP 08807	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>KUMAR</u>		Family Name <u>RAMASWAMY</u> or Surname	
Inventor's Signature <u>[Signature]</u>	Date <u>20 October 2003</u>		
Residence: City <u>PRINCETON</u>	State NJ	Country US	Citizenship India
Mailing Address			
Mailing Address 71 SAYRE DRIVE			
City PRINCETON	State NJ	ZIP 08540	Country US
<input checked="" type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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DECLARATION — Utility or Design Patent Application

NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name JUN		Family Name or Surname LI	
Inventor's Signature <i>JUN</i>		Date 10/3/2003	
Residence: City MIDDLESEX	State NJ	Country US	Citizenship CHINA
Mailing Address			
Mailing Address 26 ORCHID DRIVE			
City MIDDLESEX	State NJ	ZIP 08536	Country US
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name JILL MACDONALD		Family Name or Surname BOYCE	
Inventor's Signature		Date	
Residence: City MONMOUTH	State NJ	Country US	Citizenship US
Mailing Address			
Mailing Address 3 BRANDYWINE CT.			
City MONMOUTH	State NJ	ZIP 07726	Country US
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Junbiao Zhang et al.
Title Watermarking	Digital Data at a User Device
Art Unit	
Examiner Name	
Attorney Docket Number	PU020392

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 24498

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

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OR

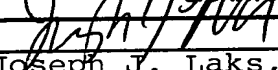
<input checked="" type="checkbox"/> Firm or Individual Name	Thomson Licensing Inc.				
Address	Patent Operations, P.O. Box 5312				
City	Princeton	State	NJ	Zip	08543-5312
Country	USA				
Telephone	609-734-6819	Fax	609-734-6888		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	2/16/08
Name	Joseph J. Laks, Reg. No. 27,914	Telephone	609-734-6819
Title and Company	Vice President, Thomson Licensing Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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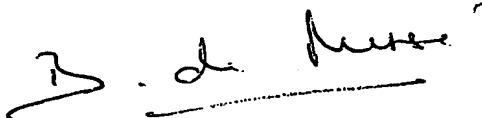
THOMSON Licensing S.A..
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F-92100 Boulogne-Billancourt
France

do hereby grant

Joseph S. Tripoli
Senior Vice President
Thomson Licensing Inc.
Two Independence Way
Princeton, New Jersey 08540

a revocable, non-exclusive and delegable power of attorney to act for us (including the signing of requisite documents) in proceedings concerning patents and applications for patents, including international and other multi-country patents and applications for patents, in our name in the Patent Offices in all countries worldwide from March 11, 2003.

DATED this 15 day of March, in the year 2004.



SIGNED

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THOMSON LICENSING S.A.

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DATED this 17th day of March, 2004.

SIGNED


Joseph S. Tripoli
Sr. Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON Licensing S.A.

WITNESS

David Fournier

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THOMSON LICENSING S.A.

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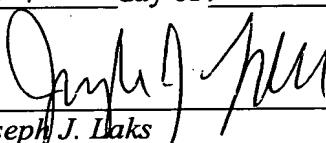
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DATED this 17 day of March, 2004.

SIGNED



Joseph J. Laks
Vice President
Thomson Licensing Inc. and
Attorney In Fact for
THOMSON Licensing S.A.

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